

Debate: COVID-19 and psychological well-being of children and adolescents in Italy

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Italy was the first country in Europe to deal with COVID-19. Measures taken by the government to contain the spread of the virus were based mainly on quarantine and social distancing: since March and for a good two months, 60 million Italians have been asked to stay home, with dramatic economic, social and psychological consequences.

School closures have caused a disruption in the daily lives of millions of children and adolescents, who make up about 16% of the Italian population. To date, despite the slow reopening, the government has decided to maintain school closure for the entire academic year, leaving the future of young people in uncertainty.

School closure and the impracticability of activities outside the house have been challenging for parents too, who had to take care of their children full-time, trying to keep them busy and helping them in learning, while working from home (Fegert et al., 2020). In addition, families were confined at home, without being able to count on external social support. In particular, children have been missing the support of important figures like grandparents. Grandparents, especially in countries like Italy, play a crucial role in family welfare, often taking care of grandchildren while parents are at work. Job loss, isolation, excessive confinement and worries over health may have contributed as risk factors for the increase in domestic violence, abuse and exploitation against children, especially in situations with pre-existing vulnerabilities (UN News).

Helplines have been extremely helpful as a point of reference available. Telefono Azzurro's services continued their work – 24/7 through phone and chat – during the lockdown. During this period, the helpline 1.96.96, dedicated to children and adolescents, registered an increase of requests for mental health issues of the 14.4% and an increase of the 22.6% of contacts by chat. The 114 Emergency Services, co-funded by the Department for Family Policies of the Presidency of the Council of Ministers, saw an increase of the 21.5% of cases managed for abuse and violence, 23.5% of problems happened in the online and of 38.5% of mental health issues (Telefono Azzurro).

Digital technologies have played a crucial role in the last months. First, to ensure continuity of learning during school closures, these technologies have been adopted to provide learning resources and homeschooling. However, online education is likely to leave many students behind, such as children who live in poor

socioeconomic conditions and do not own an electronic device or Internet connection, and children with specific learning disorders or other special educational needs. In Italy, many public schools were not set up to use online learning platforms or did not have adequate technology to provide online teaching. At the end of March, only 67% of schools had activated distance learning, reaching 6.7 million students out of 8.4 million enrolled (Senato della Repubblica).

Internet-related technologies, such as social media and online games, also gave children and young people the opportunity to keep their relationships alive, as well as to express their opinions and beliefs. Nevertheless, young Internet users were more exposed to the oversharing of private information and intimate content, but also to screen time problems. Spending more time online might have exposed them to the risk of being groomed by predators (Europol).

Therefore, among experts there is a raising of concerns with regard to the psychological impact that the lockdown and the pandemic might have on children and adolescents, although in different ways depending on their age and other factors.

The first evidence of the negative effects of a prolonged quarantine on children's lives comes from a study conducted in Italy and Spain (Orgilés et al., 2020), the two European countries most affected by the pandemic. This study has pointed out a worsening of children's emotional state and behaviour, especially difficulties in concentration, boredom, irritability and loneliness. However, Spanish children seem to be more affected by these symptoms than their Italian peers. According to the authors, this may be due to the fact that when the study was conducted, Italian children were already allowed to go outside for short walks near home, whereas in Spain this had not yet happened. Instead, Italian children are perceived by their parents as sadder than Spanish children, probably because the quarantine was longer lasting.

A national survey conducted by Telefono Azzurro and DoxaKids (2020) during the quarantine interviewed a sample of 291 Italian parents, with at least 1 son aged from 0 to 18 years old. According to the results, the 61% of the participants declared that their involvement in their sons' school activities had been increased. Moreover, the 23% of them experienced difficulties at home during the quarantine, 18% found it difficult to find

adequate spaces inside the house and 20% found it difficult to coordinate between homeworking and their children online school activities. The survey also investigated changes in behaviours and habits in children and adolescents, according to their parents. The results showed that 30% of the parents reported an excessive use of social networks and online games, 25% reported changes in eating and sleeping, and 18% reported signs of isolation and withdraw.

The quarantine is also affecting those young people who already suffer from serious mental health conditions, such as autism spectrum disorder, psychosis or anxiety disorders. Children, especially those with pre-existing vulnerabilities and those suffering of mental disorders, need special support in order to deal with uncertainty and to tolerate negative feelings.

In these patients, loneliness and the lack of routine may have jeopardised their well-being and worsen their condition. Because of the temporary closure or limitation of the local support services, these population and their therapeutic needs in most cases have not received the care and attention they needed. Moreover, during the emergency, the majority of hospital efforts have been devoted to the fight against COVID-19, and many services, including mental health services and in-person session, have been suspended (except for emergencies) (De Girolamo et al., 2020). In many cases, this has led to the temporary interruption of therapy and counselling for people in need of help, including children and young people, with serious consequences. However, some mental health services have adopted online modalities to continue to offer support to their patients and the general community in search of help during this difficult time.

It is fundamental to keep young people's needs at the core of reconstruction plans, not only to allow them to return to school safely, but also in terms of providing them with some strategies to heal and deal with this stressful and potentially traumatic situation. One of our first goals should be to develop continuous research in order to understand this complex situation and to evaluate possible correlations with mental health and social well-being. Research, on a global basis, can provide insights and knowledge for future plans.

In conclusion, our response to coronavirus should include a special attention to mental and social well-being. All kinds of schools should be involved in these activities, since teachers and educators are in a perfect position to prevent and identify the problem. Translating research into policies can guide the implementation of evidence-based programmes, in order to avoid medium and long-term psychological effects of the pandemic.

Acknowledgements

The authors have declared they have no competing or potential conflicts of interest.

Ethical information

No ethical approval was required for this article.

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Accepted for publication: 12 June 2020